

Richards, William Martin.

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making of criminals.

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PHYSICAL DEFECTS AS A FACTOR
IN THE MAKING OF CRIMINALS.

By WILLIAM MARTIN RICHARDS, M.D.,
New York.

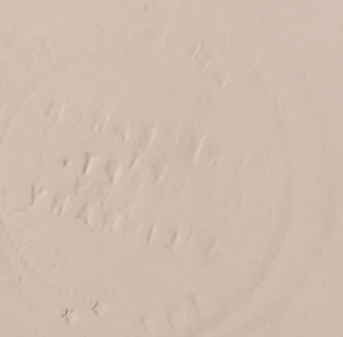
WE today look back with horror on the
penal methods of our ancestors, but doubt-
less our ancestors will look back with equal
horror on ours. We congratulate our-
selves that we no longer hang men for
trivial offenses, and instead of ducking our
wives when they scold, we now let them
speak out their minds, and generally find
there is some cause for their scolding. Is
it not equally true that our descendants
will wonder why people as sensible as we
are in many lines paid so little attention
to the physical causes of crime, and why
we did not treat it as a moral disease, for,
in the words of Taine, there is a physical
cause for vice and virtue as there is for
heat and cold.

If we investigate thoroughly, I believe,
that we can find the cause which makes
criminals different from our other brothers
and sisters. In each case there must be
some actual factor which produces these
so-called degenerates, and which we can
discover and remove if we only give
enough time and labor to the investiga-
tion. Among my acquaintances is William
Evers, formerly guard on "murderers'
row" in the New York City prison known
as the Tombs, and now chief guard of
the workhouse on Blackwells Island. He
once said to me: "I was guard on mur-
derers' row for twenty-five years, and have
been dealing with criminals for twenty-
nine years. Probably I have seen more
murderers than any man in the United
States, possibly in the world, and I have
never seen a criminal who did not have
some physical defect which, in my opinion,
was the cause of his being where he was."
No one who knows Mr. Evers would call
him a theorist, or a crank riding a hobby
to death. Of course, we all know there
are cases of individuals who are trium-
phantly virtuous under the most adverse
physical conditions, individuals whose moral
fibre is of such strength that no suffering,

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no merely physical disability can weaken it. On the other hand, when moral fibre is weak, there is all the more reason why every physical advantage be given, and honesty and industry made as easy as possible. Underneath every crime is some kind of incompetence, and underneath incompetence is some kind of physical defect, either inherited or acquired. I do not mean that physical defect is the only cause of incompetence and crime, but it is one cause, and it is often the foundation upon which incompetence and crime are based.

The incompetent is born with bad eyes, which make him or her unable to do near work without suffering; is born with a club foot, which hinders physical activity; or with some blood disease, which interferes with his mental processes. All these are examples of congenital defects. Again, he injures his nose, which eventually causes catarrhal deafness, or tuberculosis of the lungs, spine, hips, or lymph glands (scrofula), or he acquires lateral curvature of the spine. This last often comes from so simple a thing as writing at school on a desk the top of which is horizontal instead of being inclined at an angle of 30 degrees, which would enable him to see the point of his writing instrument without turning his head on one side. Then through the continuous standing posture necessitated by some occupations, as those of policemen, clerks, street car motormen and conductors, the individual acquires falling arches of the feet (flat foot), by many erroneously called rheumatism of the feet and legs. All these are acquired defects. The influence of these afflictions is widespread and causes incompetence in various ways.

I shall now take up the different physical defects which I have seen in criminals and in incompetents:

I. EYESTRAIN.

According to Dr. George M. Case, the majority of the boys in the reformatory at Elmira, N. Y., have such abnormal eyes that it is impossible for them to do, without suffering, any amount of near work, even the making of shoes, for instance.

According to Dr. George L. Orton, resident physician at the reformatory at Rahway, N. J., the same condition of affairs exists there, only worse. The difference between Dr. Case's work and Dr. Orton's is that Dr. Orton was allowed to use drops in the eye to relax its muscles, whereas Dr. Case was not, the state of New Jersey being now run on an intelligent plan as contrasted with the state of New York at the time Dr. Case's investigations were made. Dr. Orton's results would therefore necessarily be more thorough, and hence give us a truer picture of actual conditions.

Dr. Case, at the Elmira Reformatory, found that the number of boys suffering from serious defects of vision was 56 per cent., and this without the use of medicine in the eyes. Dr. Orton, of the New Jersey Reformatory, found in his last series of 125 cases that without the use of medicine only 35 per cent. of the boys apparently needed glasses. When he used the medicine, 83 per cent. of the boys needed glasses. In other words, if he had not used the medicine, he would have concluded that 48 per cent., or half of the boys did not need glasses, when they really did. Therefore, if you are not using medicine in the examination of the inmates of your institutions you are failing to prescribe glasses for three-fifths of the people who need them, and are giving glasses to only two-fifths. In other words, if the same conditions prevail in your institution which prevail at the New Jersey Reformatory you have given 35 per cent. of your inmates glasses. Of the remaining 65 per cent., three-fourths need glasses, but you have not found it out. Since the percentage found by Dr. Case at Elmira in the cursory examination was larger than that found by Dr. Orton under the same conditions, it is only fair to suppose that had Dr. Case's facilities been as adequate as Dr. Orton's, the percentage discovered by the use of the medicine would have been much larger. This will be more easily appreciated by giving an example.

Frederick W. Greene, 23 years old, has served two sentences in the House of Ref-

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uge, one sentence in Elmira Reformatory, and one sentence in Auburn Prison. He was examined by Dr. Case at Elmira, and as he had normal vision without medicine with the test letters at twenty feet, he was put down as not needing glasses. After his last sentence at Auburn I examined his eyes with medicine and found him so far-sighted that it was impossible for him to do any prolonged near work without suffering. Yet, without the use of medicine, his eyes had been passed as normal! Now, the point is this, if he had been sent to the New Jersey Reformatory instead of the New York Reformatory, he would have been given glasses with which he could have done prolonged near work without suffering and might never have committed the crime which gave him a sentence of two years in Auburn Prison. I know that in many reformatories and prisons under your charge, regular eye examinations are made, but unless medicine is used in the eyes, you will never find the far-sighted defects of vision, and it is the far-sighted defects that make boys and girls hate all near work, and not the near-sighted defects at all, although these are the ones that are apparent without medicine.

Here is the worst example I ever heard of: In one of our most progressive eastern states there is a penal institution where women are supposed to be reformed. The physician in charge of this institution has a set of lenses for testing eyes which on investigation were found covered with dust. This physician on his records indicates the results of his eye examinations in this way: G for good; F, bad enough to need glasses; B, blind.

Spectacles are bought at \$4.20 a dozen, and the patients who are told that they need glasses help themselves to those that seem the most comfortable. And this is the attention given to women who need our help more than all others, and in a line of work which I consider the most delicate in the whole field of medicine!

In a former state of civilization, or even now in the country districts, a boy who

was afflicted with defective vision could earn a living. To quote a justice of the Court of Special Sessions of New York City, "a boy in the country can see a cow on the other side of a fence no matter how bad his eyes are," and herding pigs has never been cited as a cause of eyestrain even by the most ardent disciples of that gospel. In the city, however, the case is quite different. Most of the work in city life requires the near use of eyes for long continued periods. Applicants for positions in some of our large corporations are tested for eyesight, and if it is not good they are rejected. Even if applicants with bad eyes are accepted they are frequently unable to perform their duties satisfactorily, and are soon discharged. As an example of this, the New York Telephone Company refuses thousands of applicants every year on account of bad vision, though the ordinary person would never think of eyes in connection with a telephone.

In the De Witt Clinton High School, in New York City, is a class of thirty-seven defectives who have failed in every subject. Nothing else could be done with them, so they were put in charge of the physical culture instructor, who reported to the principal that they were "a lot of crooks, thieves, and gamblers." Now, the most cursory examination of these boys' eyes as compared with those of a normal class in the next room showed that these defective boys averaged less than half as good eyesight. Does it require any special gift of prophecy to foretell that in the course of the next ten or fifteen years almost all of these boys will go the usual route of crime, reformatory, and prison? The American Association for the Conservation of Vision tried to obtain \$150 for two months' salary of a young doctor who wished to fit these boys and similar boys with glasses. They were unable to obtain this money. If we multiply this \$150 a thousand times we will get a conservative estimate of what those boys will cost the community before they die in penal institutions. How much cheaper it would have been to have sup-

plied them with glasses, to say nothing of making them productive members of the community instead of parasites. Defective eyesight and its consequent discomfort in school leads to truancy. Every criminologist knows that the majority of criminals were truants when children. This is the way it works: Being idle, they fall in with idle people who are the only society available during working hours—and we all know who finds "mischief for idle hands." Idle people must live, and if they have no one to support them they soon drift into crime. The truant learns through them to indulge in petty larceny or pocket-picking, which eventually results in arrest. This frightens him and he tries to reform, only to find as he found in school, that he dislikes near work or it causes some kind of discomfort. He craves amusement, good clothes, and good food, just what we all work for, and the price of these is always money. He is tempted and again stoops to crime. The reformatory is his next residence, and it as good a place for this purpose as it can be made, considering the disadvantages under which it labors, one of the most serious of which is the fact that confirmed criminals are frequently sent there, and the boys learn from them what they do not already know about successful methods of crime.

Investigation of the history of the inmates of the homes for fallen women reveals similar stories, except that there we find more prostitution than theft.

We have spoken of the boy truant, the beginning of whose downfall seems traceable to eyestrain. But what of the girl truant? Alas for her, the streets hold even more temptation and even greater degradation, than for her brother. The idle boy, with no one to support him, must live somehow, so he turns to theft; but the idle girl finds only too many ready and willing to support her, but—at what a price! And very soon she, too, finds herself on the way to a house of refuge.

In the reformatories and refuges these boys and girls are taught various trades and handicrafts, all necessitating the use of

the eyes, and as it is a well-known and self-evident fact that the use of defective eyes without glasses to correct them only increases the defect, these unfortunate young people come out of the institutions that are supposed to reform them actually worse off and less well equipped to earn their living than when they entered.

One instance of this from the New York Magdalen Home is fairly typical. A girl of 19 whose mother is dead and whose father is in an old soldiers' home has been an inmate for eighteen months. I have visited the public school which she had attended up to five years ago. Two teachers remembered her as a very stupid girl. The records of the school are still more illuminating, for when she left at the age of 14 she was in grade 4B, which the average girl leaves at 10. In other words, she was four years behind other girls of her own age and nativity. She left there in February, 1904, with her working papers. By September, 1907, she was committed to the Magdalen Home as an incorrigible. There she has been found so stupid that the only work they could give her was dusting the stairs, and even this was never well done. Examination showed that she was 90 per cent. deaf and 95 per cent. blind, that also she had such severe Rigg's disease that it was only a question of time when either her teeth would fall out or else she would have Bright's disease or diabetes as a result of continually swallowing the poison thrown off by the diseased gums. Since this examination she has been operated on for appendicitis, and we know that the germs from the abscesses at the roots of the teeth in Rigg's disease form one of the causes of abscesses in the appendix. She also suffered with continuous headaches, which disappeared on wearing the glasses prescribed. These gave her normal vision. An operation on her nose would entirely cure her deafness, which is only functional. Are we not in a splendid era of civilization when we punish a motherless girl of 17 for being almost blind and nearly deaf? She had been a failure in nearly everything she had tried. With



a mother dead and a father in an old soldiers' home, it was almost inevitable that she should take "the easiest way." If we condemn the methods in penal institutions of 200 years ago, what will be the world's opinion of us and our savage methods 200 years hence?

This is the direct manner in which defects of vision may cause incompetence, but the indirect results are quite as disastrous. It is well known to those who are familiar with the life of criminals that a large proportion of them are drunkards, opium smokers, morphine and cocaine habitués. Every one of these drugs relieves the discomfort caused by eyestrain, and on the removal of eyestrain the individual frequently reforms. I quote from the words of Algernon Tassin in *Good Housekeeping* a case which came under my personal treatment, and the record of which I gave him for an article on "Eyestrain and Immorality": "In one of the best known churches in one of the largest eastern cities is a clergyman who some years ago had headaches of such intensity that he was unable to sleep. After enduring insomnia for a week, he would have an insane craving for drink, and would steal away and drink himself dead drunk. This had been going on for twelve years. During this time he had lost church after church. His wife had left him and his friends had given him up. He would go to some new place and begin again, and the man's magnetism and sincerity were so great that each time, though with increasing difficulty, he would be afforded a new start. When he finally came to me he was just out from the alcoholic ward of a hospital, and had become a thorough bum from whom nothing more could be hoped. He was sent to me by the only person in the world who yet had faith in him. He was given the right pair of glasses and his headaches never reappeared. With the insomnia that they had caused all desire for drink left him—a desire which had been repugnant to his nature. He told this to his bishop, who, willing to give him one

more chance, got him a little country parish for the summer. He filled the church to overflowing, and the bishop, seeing him entirely rehabilitated, had him transferred to his present charge of great usefulness. He has now been one year without even the craving for drink."

Acts of violence committed in fits of anger may be indirectly due to eyestrain, which is the cause of the irritability. For instance, in June, 1910, the mother of a cross-eyed boy of 9 brought him to me to be fitted with glasses. I have never seen such a little devil. He took delight in doing everything possible to annoy his mother, and showed great ingenuity in the process. His work at school was so poor that his parents were afraid it would be necessary to take him out of it. One year afterward they came to see me. He had gone to the head of his class in studies, and a more unselfish and helpful child I have never seen. All the time that he was in my office he was doing something to help somebody.

A woman who had been condemned to death for murder in New Jersey had her sentence commuted by the governor to life imprisonment on the intercession of a wealthy philanthropist who had himself suffered from eyestrain and its consequent irritability, and who convinced the governor that a woman who suffered from the amount of eyestrain which eyes such as hers must necessarily cause ought not to be held responsible for an act of violence committed in anger.

Senator Harry V. Osborne, of New Jersey, who drew the well-known New Jersey prison labor law, is a very good example of a man with splendid eyes. For example, he has no astigmatism in his right eye, and in his left he has the smallest amount of astigmatism that we can measure. Compare him with Alice Lewis, a Chinatown girl in New York, who is terribly far-sighted.

Senator Osborne has normal vision without glasses and consulted me only because he found that he was sleepy after dinner

whenever he had been doing a great deal of eyework during the day at the office.

Alice Lewis had 3 per cent. vision in the right eye and 2 per cent. in the left. She could not tell whether the clothes or dishes she was washing were clean or dirty, but with correct glasses she had normal vision.

With such eyes as these would it not have been a miracle if Senator Osborne had been a failure and Alice Lewis a success?

But the point is, why need Alice Lewis have been a failure? If in the beginning at school she had had glasses which gave her normal vision she might not have become a Chinatown girl. She could not see well enough to earn her living by washing dishes, yet she had to live. Who can say if Senator Osborne's eyes had not been good enough to allow him to make his living by honest means, he also would not have been driven to dishonest ones? I mention these two cases because you know the splendid service of Senator Osborne to the community, and I know that Alice Lewis, upon receiving glasses which gave her normal vision which Senator Osborne was born with, also became, in a smaller way, a valuable member of her community.

As an example of how much stronger is the influence of physical defects than environment, here are two sets of sisters brought up under identical conditions:

Of the first two sisters, Sarah and Annie. Sarah, the good sister, has almost perfect eyes: R. (—).37. (—).12, cyl. 180. L. (—).37, cyl. 177½.

Annie, the bad sister, had eyes with which she saw nothing. R. (—)2.75, (—).12, cyl. 92½. L. (—)3.12, (—).12, cyl. 150. She was serving a sentence in a penal institution. She had never wanted to work, and was sleepy all the time.

Sarah, the good sister, was found working as a night telephone operator, supporting the family, sleeping four hours a night, and attending Normal College in the day to fit herself to become a teacher, which she now is.

On being given proper glasses Annie, the bad sister, has for a year and a half

earned her living in a large department store, which she had never done before.

Of the second pair of sisters, Lizzie, the good one, has good eyes. She is a self-supporting, self-respecting milliner.

Fannie, the bad sister, an unmarried mother at 17, had eyes with which she could see nothing either near or far. She was discharged from one position after another on account of stupidity. On being given the right glasses, she immediately secured a position and has been self-supporting for over a year.

These two instances appear to me rather suggestive.

It seems to me that one reason why the use of convict labor for road building has been so successful is the fact that the work is out of doors, and so does not tire the eyes. Another indication that the eyes of our criminals are defective is that we find the work being done in penal institutions competing with that done in institutions for the blind. Naturally work that is suitable for the blind is suitable also for the half-blind, which many criminals are.

Many of my hearers will say that they have never known glasses to work wonders, and this is not surprising when we consider that hardly one oculist in 100 knows how to prescribe glasses accurately. It is work of the most delicate description, and cannot be done rapidly, as it requires both time and patience, and at a dispensary neither of these is given. Even when the work is done by doctors and specialists in private practice it is usually done without the use of drops in the eyes to relax the muscle of accommodation and to enable us to discover the actual vision of the eye when at rest, not the vision the individual may have while able to use this muscle to focus the eye. What is the cause of this ignorance and inefficiency among oculists? It is the fact that in our medical colleges students are not taught to fit glasses, which really forms nine-tenths of the actual work of the oculist. They are taught diseases of the eye, but not lens-fitting, and only after graduation learn the latter from some other doctor who may possibly have re-

ceived entirely wrong ideas in the beginning and supplemented them by his unguided experience. It is the cherished hope of many medical men, that there will soon be in this country a good school of refraction, and not until this is established will the evil effects of eyestrain be abolished, for it is not sufficient merely to wear glasses. Exactly the right glasses are necessary, as the wrong glasses are frequently worse than none at all. This method has been tried on a small scale in one penal institution. With even the work attainable at the New York State Reformatory, the resident physician reports that deportment and efficiency have been enormously improved by fitting the boys with glasses.

For the sake of economy the lenses and mountings can be made in the prisons. There is a tremendous demand for proper optical work in this country, and for a convict to understand the work of an optician thoroughly would give him a better chance of earning an honest living after his sentence expires.

2. DRUG HABITS.

A large proportion of all criminals are alcoholics and drug fiends. The present method of dealing with them is entirely inadequate. It consists merely in withholding the stimulants to which they have accustomed themselves, thus increasing their ugliness of temper. They can be cured of crime only by being cured of this craving.

In an epoch-making article in the *Journal of the American Medical Association* for September 25, 1909, Dr. Alexander Lambert gave the formula and method of use of C. B. Towns' mixture of belladonna, hyoscyamus, and prickly ash, which in three days really does eliminate permanently the craving for alcohol, morphine, and narcotics in 80 per cent. of the cases. I believe this method ought to be used in every penal institution on those who suffer from this craving. Would this not have been a sensible thing to do in the following case? I know a burglar, who has served

three sentences, the last being for seven years. He is a perfectly honest man when sober and only steals when drunk. Practically then he has served all his time for drunkenness. How much better for him and the state to remove this cause and add to the community a permanently honest man!

3. AS TO STOPPED-UP NOSES.

The medical profession is awaking to the fact that a large number of diseases are due to conditions in the nose as an underlying cause, and mouth-breathing as its consequence. From this come long-continued colds in the head, attacks of sore throat or tonsilitis, catarrhal deafness (which constitutes 95 per cent. of all deafness), irregular teeth caused by lateral pressure on them by the cheeks, giving mouth breathing either by day or night, resultant bad position and interlocking of the teeth, and a greater consequent deposit of tartar around their roots caused by the pockets thus formed for the retention of food particles, and the difficulty of cleaning them properly with the tooth-brush. This frequently goes on to formation of pus around the teeth, with their consequent decay and loss, and the flow of pus increases the frequency of sore throat and many digestive troubles. Many cases of appendicitis could be traced to this source of infection, and many surgeons now refuse to operate for this disease until the teeth have been put in a healthy condition.

Nasal disease is frequently an essential factor in the production of asthma and hay fever. Nasal obstruction results in mouth-breathing, with consequent lateral crowding of the teeth by the pressure of the cheeks, not counterbalanced as it is normally by the outward pressure of the tongue. This often makes it impossible for the lips to close over the teeth and mouth: breathing is continued even after the nasal obstruction is removed. Breathing through the mouth, the patient inhales the germs that have been spit in the street by consumptives and blown up in particles of dust. Tuberculosis of the lungs, of the



spine (hunchback), of the joints (as in hip disease), in most cases has as an underlying factor bad conditions in the nose. These nasal abnormalities, by producing attacks of bronchitis or by causing enlarged tonsils, present a favorable soil for the entrance of the germs of this disease. The so-called green sickness of young girls is nothing but unsuspected tuberculosis of the lungs or lymph glands.

The following case illustrates the connection between nasal stoppage, irregular teeth, and hip disease: Two years ago a boy of 10 was brought to me with pronounced nasal stoppage and irregular teeth, which gave him the appearance of the typical degenerate. His mother kept postponing an operation for the relief of this condition until he finally contracted hip disease. I am told that he must wear a brace for the next five years. Now, if that boy had belonged to poorer parents, the disease would probably have progressed until he was a cripple and he would subsequently have joined the ranks of beggars or incompetents who are always parasites on the working members of the community. Another example is a boy of 23 who has served two sentences in the House of Refuge, one in the Elmira Reformatory, and two years in Auburn Prison. Tuberculosis of the spine makes any prolonged physical exertion difficult, and this was due primarily to mouth-breathing. Dr. Orton informs me that 51 per cent. of defective boys entering the Rahway Reformatory suffer from serious nasal disease, and 33 per cent. of them have teeth which are so bad that they are a menace to their general health and efficiency. This is directly along the line of the results of the investigation conducted by the Russell Sage Foundation, which shows that children with defective teeth average worse in their studies than children with normal teeth. Lateral crowding of the teeth caused by nasal stoppage is one cause of what is known as impacted teeth, where a tooth comes in at right angles to an adjacent tooth. This is a cause of neurasthenia and insanity. Dr. W. S. Upson, of Cleveland, O.,

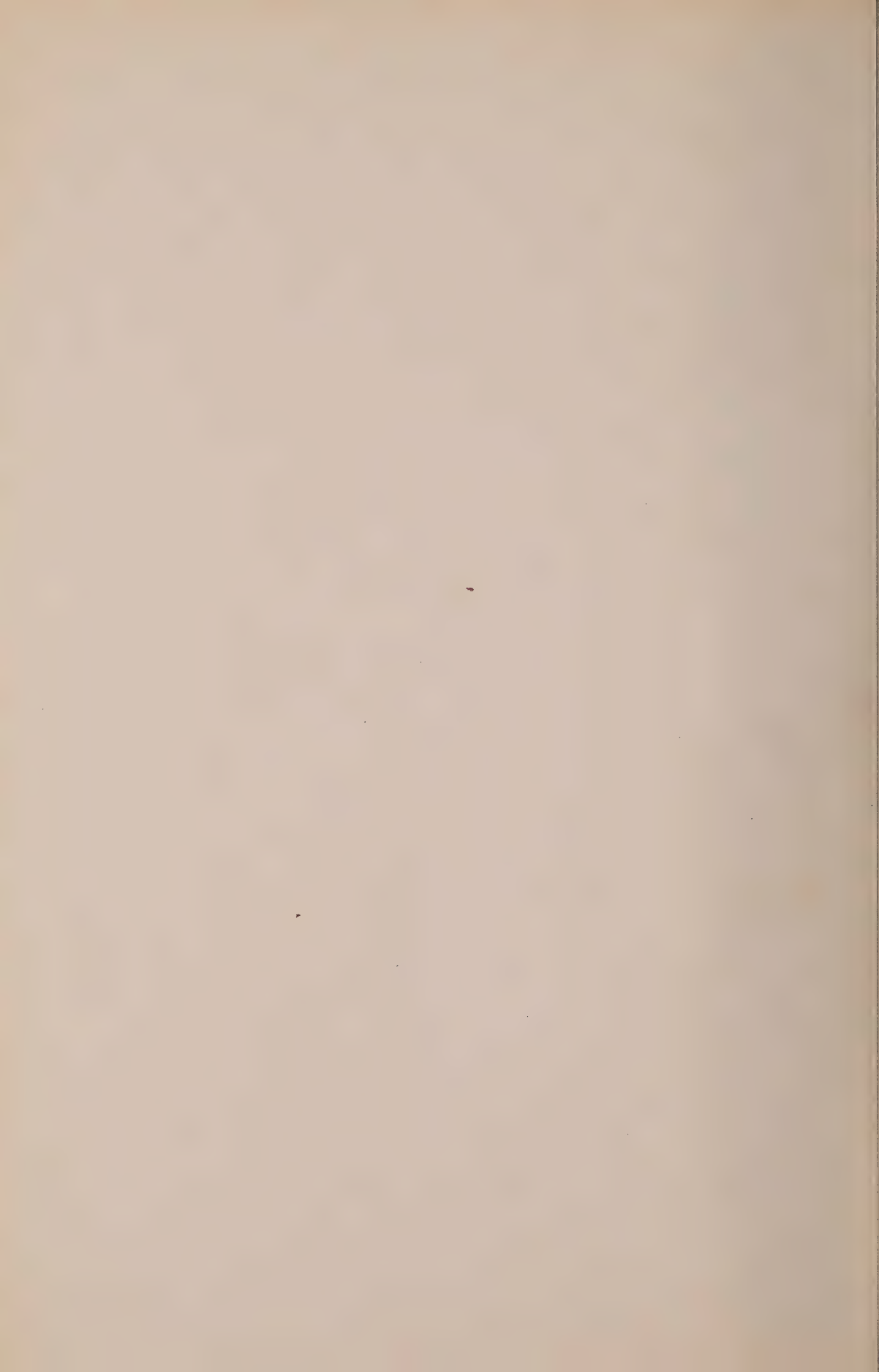
reports a number of cases of neurasthenia and insanity cured by the removal of impacted teeth. There is no way to discover the presence of impacted teeth except by the use of an x-ray machine. Practical penologists, such as you are, know that a large number of the inmates of your institution fall below the normal standard mentally. Ought you not to have x-ray machines in your institutions and have a routine examination made of the teeth of criminals before they begin their sentences?

4. THE SPINE

We ought also to have a routine examination of the spine of every criminal at the beginning of his sentence. If we do this, and correct whatever troubles we find with the spine, we will convert a large number of the incompetent people who come into our penal institutions into competent persons.

5. FLAT-FOOT.

Just as primitive life had its disadvantages and its diseases, so civilization has them also. Primitive man was not obliged to stand for hours in the same position, continually overusing the set of muscles which hold up the arch of the foot, nor was he obliged to walk on hard pavements, necessitating the use of shoes and the consequent wrongly directed pressure on the small bones of the feet. With the use of pavements and the consequent necessity for shoes, combined with the enormous specialization and division of labor which civilization brings, a great many of us are obliged to be on our feet continually. This is particularly true of the class of people whose poverty, ignorance, and lack of proper home training impel them into our penal institutions. This disease is particularly common among waiters, housemaids, clerks in stores, policemen, car conductors and motormen, and in fact every one who is on his feet the whole day long. It is like eyestrain, in that it arises from the necessity of using constantly a muscle or set of muscles which were never used in this way in primitive life and which therefore have not been fitted by natural



selection to stand this prolonged strain. The result is particularly common among the peddlers of the lower East Side of New York, giving them the peculiar walk which is comically depicted on the stage in imitating the East Side Jew. It should be pathetic instead of comic, for it is associated with the most excruciating pain and is due to the breaking down of the arch of the foot caused by long hours of standing in the street beside his cart. It is easily corrected and prevented by properly made shoes or steel arches inside of ordinary shoes, which can be manufactured in your institutions.

6. UTERINE TROUBLES IN WOMEN.

Just one word about the diseases peculiar to women. Before a woman begins a sentence in a penal institution she ought to be examined for any displacements of the womb and for gonorrhea. Nothing makes more laziness than the poisons produced in gonorrhea, and nothing produces more crime than laziness. All lacerations due to child birth ought to be repaired and all displacements of the uterus ought to be corrected. An example of this fell under my observation when I was in general practice, and shows how important the latter may be. Twelve years ago I was consulted by a girl of 19 with the following history. She was lazy, nauseated, head-achy, had pains in the small of her back, and, to quote her adopted mother, "would cry if you crooked your finger at her." In addition to this she was so selfish that she never did anything for anybody except herself. After replacing a womb which had been pushed over backward by a sudden jolt when stepping off a street car, this girl became an industrious, helpful, unselfish woman.

7. DISEASES PECULIAR TO MEN.

Most of the criminals I know have venereal diseases, and a routine examination of these ought to be made and appropriate treatment given. For example, most of them have chronic deep gonorrhea, which, as it gives no discharge is not recognized. A routine examination of the urine of con-

victs ought to be made and, if cloudy, treatment instituted. It is very necessary, also, to make a routine examination for stricture, as undilated stricture is frequently the cause of chronic gout, and this often incapacitates people for work for long periods.

CONCLUSION.

There are almost as many exciting causes of disease as there are diseases themselves, but underneath them are a few great causes which can be grouped under two general heads—faults of structure and faults of habit. That is, either the individual is built wrong somewhere, or else he is leading a wrong life. Sometimes causes from these two groups act and react upon each other. For example, the clergyman I before told you of was suffering from a fault of structure in his eyes which caused his drunkenness. This habit was damaging his entire body, lessening his competence and so lowering his ability to provide properly for himself. Now, isn't it simpler and cheaper to do as Dr. Orton is doing in the New Jersey Reformatory with the cooperation of Dr. Frank Moore, namely, correcting all possible faults of structure and habit which lead to disease, rather than following the method of his predecessors, who spent hundreds of dollars on drugs which they distributed to the boys after they had become sick? With what help I can give him, Dr. Orton for the next year is going to pursue the following method: On the entrance of the boy into the reformatory he will give that boy proper glasses, if necessary. He will make a routine examination to relieve nasal stoppage, correct defective teeth, spine, joints, feet, and strictures of the urethra, and at the end of that year he will tell you what the results have been.

As matters stand now, men and women with physical defects come into our penal institutions and are compelled to work at occupations which they dislike because they cause some kind of physical discomfort. Just as prolonged near use of defective eyes increases their defects, so also does the prolonged strain on defective spines or

defective arches of the feet increase their defects. In other words, no matter how much we do in training these people morally, we actually turn them out of our institutions, in many instances with less physical ability than they came in with. Should we not turn these people out of our institutions in better physical condition, instead of discharging them in worse condition? And if we do so, will not many of them feel that their prison sentences were the best things which ever happened to them?

Won't some of you try the same method in your institutions? If you will I shall be glad to give my services and as much time as is necessary to the instruction of every physician whom you will send to me in New York. Won't you try it?

The Powellton, Broadway and
Ninety-seventh Street.

"SPES PHTHISICA."

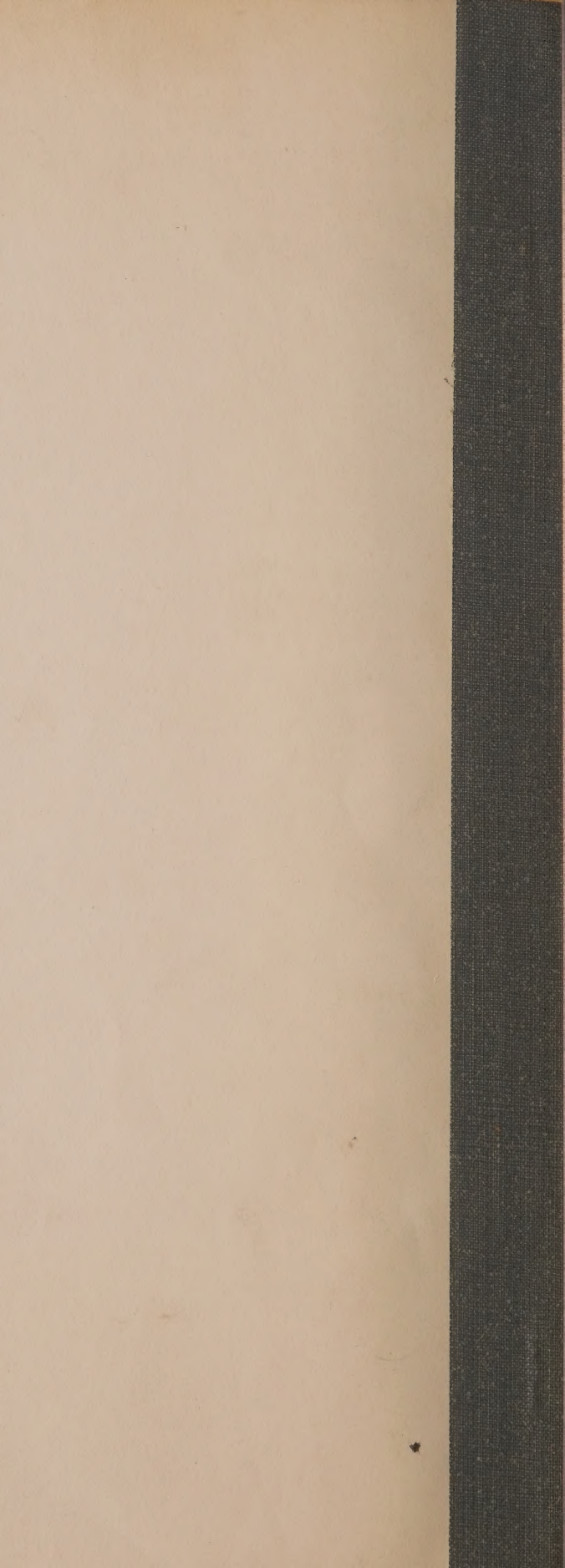
BY THOMPSON FRAZER, M.S., M.D..

Asheville, N. C.

It is a difficult matter to change the trend of public opinion, especially when an opinion has been deep-rooted for centuries; old beliefs die hard. A statement containing a half-truth may by frequent repetition be converted into a dogma and accepted blindly by generations to come.

Such is the case in the attitude of the public toward the mental state of the tuberculous. By the world at large and by a considerable body of the medical fraternity he has been regarded as a hopeful, irresponsible being, who, without pains and without worries, looks upon his approaching death with serenity, for since the dawn of medicine "Spes phthisica" has been an axiom. It is the aim of this paper to show that not only is this cheerful frame of mind often lacking, but that the consumptive is, in addition, frequently subject to mental depression of a rather serious degree. Let us compare the writings of some of the tuberculosis specialists on this topic.

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